



COUNTY OF FAIRFAX
 Department of Planning and Zoning
 Zoning Evaluation Division
 12055 Government Center Parkway, Suite 801
 Fairfax, VA 22035 (703) 324-1290, TTY 711
www.fairfaxcounty.gov/dpz/zoning/applications

APPLICATION No: SP 2014-DR-121

(Staff will assign)

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 Department of Planning & Zoning
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 Zoning Evaluation Division

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APPLICATION FOR A SPECIAL PERMIT

(PLEASE TYPE or PRINT IN BLACK INK)

APPLICANT	NAME	Rosa E. Avellaneda DBA ZEBRATION.TOTS	
	MAILING ADDRESS	1802 PEABODY DR. FALLS CHURCH VA 22043	
	PHONE HOME (703) 442 4704	WORK ()	
	PHONE MOBILE (703) 629 2719	EMAIL ROSESTORMER @ HOTMAIL.COM	
PROPERTY INFORMATION	PROPERTY ADDRESS	1802 PEABODY DR. FALLS CHURCH VA 22043	
	TAX MAP NO.	0303030413	SIZE (ACRES/SQ FT) 10,665
	ZONING DISTRICT	R-4	MAGISTERIAL DISTRICT DRANESVILLE DISTRICT # 1
	PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION:	N/A	
SPECIAL PERMIT REQUEST INFORMATION	ZONING ORDINANCE SECTION	8-305	
	PROPOSED USE	HOME CHILD CARE FACILITY	
AGENT/CONTACT INFORMATION	NAME	Rosa E. Avellaneda	
	MAILING ADDRESS	1802 PEABODY DR. FALLS CHURCH VA 22043	
	PHONE HOME (703) 442 4704	WORK ()	
	PHONE MOBILE (703) 629 2719	EMAIL ROSESTORMER @ HOTMAIL.COM	
MAILING	Send all correspondence to (check one): <input checked="" type="checkbox"/> Applicant -or- <input type="checkbox"/> Agent/Contact		
<p>The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject property as necessary to process the application.</p> <p>Rosa E. Avellaneda TYPE/PRINT NAME OF APPLICANT/AGENT</p> <p><i>Rosa E. Avellaneda</i> SIGNATURE OF APPLICANT/AGENT</p> <p><i>Deborah Lesho Substant</i></p>			

DO NOT WRITE IN THIS SPACE

Date Application accepted: June 20, 2014Application Fee Paid: \$ 435.00

SP 2014-0128